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## NOTICE OF ALLOWANCE AND FEE(S) DUE

37499

7590

08/25/2005

ONYX PHARMACEUITICALS, INC. 2100 POWELL STREET 12TH FLOOR EMERYVILLE, CA 94608 EXAMINER

MONTANARI, DAVID A

ART UNIT PAPER NUMBER

1632

DATE MAILED: 08/25/2005

APPLICATION NO.	FILING DATE	· FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/714,409	11/14/2000	Leisa Johnson	ONYX1033ORD	5051

TITLE OF INVENTION: ONCOLYTIC ADENOVIRUS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	11/25/2005

THE APPLICATION IDENTIFIED ABOVE HAS BEEN EXAMINED AND IS ALLOWED FOR ISSUANCE AS A PATENT. PROSECUTION ON THE MERITS IS CLOSED. THIS NOTICE OF ALLOWANCE IS NOT A GRANT OF PATENT RIGHTS. THIS APPLICATION IS SUBJECT TO WITHDRAWAL FROM ISSUE AT THE INITIATIVE OF THE OFFICE OR UPON PETITION BY THE APPLICANT. SEE 37 CFR 1.313 AND MPEP 1308.

THE ISSUE FEE AND PUBLICATION FEE (IF REQUIRED) MUST BE PAID WITHIN THREE MONTHS FROM THE MAILING DATE OF THIS NOTICE OR THIS APPLICATION SHALL BE REGARDED AS ABANDONED. THIS STATUTORY PERIOD CANNOT BE EXTENDED. SEE 35 U.S.C. 151. THE ISSUE FEE DUE INDICATED ABOVE REFLECTS A CREDIT FOR ANY PREVIOUSLY PAID ISSUE FEE APPLIED IN THIS APPLICATION. THE PTOL-85B (OR AN EQUIVALENT) MUST BE RETURNED WITHIN THIS PERIOD EVEN IF NO FEE IS DUE OR THE APPLICATION WILL BE REGARDED AS ABANDONED.

#### HOW TO REPLY TO THIS NOTICE:

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If the SMALL ENTITY is shown as YES, verify your current SMALL ENTITY status:

A. If the status is the same, pay the TOTAL FEE(S) DUE shown above.

B. If the status above is to be removed, check box 5b on Part B - Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and twice the amount of the ISSUE FEE shown above, or

If the SMALL ENTITY is shown as NO:

A. Pay TOTAL FEE(S) DUE shown above, or

B. If applicant claimed SMALL ENTITY status before, or is now claiming SMALL ENTITY status, check box 5a on Part B - Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and 1/2 the ISSUE FEE shown above.

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III. All communications regarding this application must give the application number. Please direct all communications prior to issuance to Mail Stop ISSUE FEE unless advised to the contrary.

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Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

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37499 75	90 08/25/2005			have its own certifica	nal paper, such as an assignmente of mailing or transmission.	one or formal drawing, must
ONYX PHARMA 2100 POWELL ST 12TH FLOOR EMERYVILLE, CA		<b>.</b>		I hereby certify that a States Postal Service addressed to the Ma transmitted to the US	ertificate of Mailing or Trans this Fee(s) Transmittal is bein with sufficient postage for fir ail Stop ISSUE FEE address PTO (571) 273-2885, on the o	smission g deposited with the United st class mail in an envelope above, or being facsimile late indicated below.
	•					(Depositor's name)
						(Signature)
						. (Date)
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nonprovisional	NO	\$1400		\$0	\$1400	11/25/2005
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MONTANAR	I, DAVID A	1632		424-093200	•	
"Fee Address" indicati PTO/SB/47; Rev 03-02 o Number is required.  3. ASSIGNEE NAME AND	ence address (or Change of O2) attached. on (or "Fee Address" Indicar more recent) attached. Use RESIDENCE DATA TO BI an assignee is identified be 37 CFR 3.11. Completion of	Correspondence tion form of a Customer  E PRINTED ON THE PATE low, no assignee data will a f this form is NOT a substitu	names of a ts OR, alter name of a ed attorney ered patent to name with NT (print of appear on to the for filing	single firm (having as v or agent) and the nar attorneys or agents. It lbe printed.	a member a nes of up to f no name is 3 nee is identified below, the d	ocument has been filed for
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5. Change in Entity Status (	from status indicated above)		•			
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The Director of the USPTO is NOTE: The Issue Fee and Pu nterest as shown by the recon	s requested to apply the Issue blication Fee (if required) we ds of the United States Pater	e Fee and Publication Fee (if ill not be accepted from anyon and Trademark Office.	any) or to one other th	re-apply any previous nan the applicant; a reg	ly paid issue fee to the applica sistered attorney or agent; or th	tion identified above. le assignee or other party in
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	MACEUITICALS, INC.		MONTANAF	U, DAVID A
12TH FLOOR	2100 POWELL STREET 12TH FLOOR			PAPER NUMBER
EMERYVILLE,	, CA 94608	·	1632	
			DATE MAIL ED. 09/25/200	

# Determination of Patent Term Adjustment under 35 U.S.C. 154 (b)

(application filed on or after May 29, 2000)

The Patent Term Adjustment to date is 0 day(s). If the issue fee is paid on the date that is three months after the mailing date of this notice and the patent issues on the Tuesday before the date that is 28 weeks (six and a half months) after the mailing date of this notice, the Patent Term Adjustment will be 0 day(s).

If a Continued Prosecution Application (CPA) was filed in the above-identified application, the filing date that determines Patent Term Adjustment is the filing date of the most recent CPA.

Applicant will be able to obtain more detailed information by accessing the Patent Application Information Retrieval (PAIR) WEB site (http://pair.uspto.gov).

Any questions regarding the Patent Term Extension or Adjustment determination should be directed to the Office of Patent Legal Administration at (571) 272-7702. Questions relating to issue and publication fee payments should be directed to the Customer Service Center of the Office of Patent Publication at (703) 305-8283.